

Patricia Booker

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/595687

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 <sup>st</sup> AMENDMENT		AFTER 2 <sup>nd</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1		1	
2		1		1		
3		2		2		
4		2		2		1
5		1		1		1
6	1		1		1	1
7		1		1		1
8	1		1		1	1
9		1		1		1
10		2		2		1
11		2		2		1
12		2		2		1
13	1		1		1	1
14		1		1		1
15	1		1		1	1
16	1		1		1	1
17	1		1		1	1
18	1		1		1	1
19	1		1		1	1
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TOTAL IND.	9	↓	9	↓	9	↓
TOTAL DEP.	12	←	12	←	9	←
TOTAL CLAIMS	21		21		18	

	AS FILED		AFTER 1 <sup>st</sup> AMENDMENT		AFTER 2 <sup>nd</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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100						
TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						